PTO/SB/22 (04-07)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006	Docket Number (Optional) 0649-0925P		
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			
Application Number 10/718,622-Conf. #1289	Filed	November 24, 2003	
For: SOLID-STATE IMAGING APPARATUS AND DIGITAL CAMERA			
Art Unit 2622	Examiner	T. H. Le	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period de	sired and enter the	e appropriate fee below):	
Fee	Small Entity I		
X One month (37 CFR 1.17(a)(1)) \$120	\$60	\$120.00	
Two months (37 CFR 1.17(a)(2)) \$450	\$225	\$	
Three months (37 CFR 1.17(a)(3)) \$1020.	\$510	\$	
Four months (37 CFR 1.17(a)(4)) \$1590	\$795	\$	
Five months (37 CFR 1.17(a)(5)) \$2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27.			
A check in the amount of the fee is enclosed.			
Payment by credit card. Form PTO-2038 is attached.			
X The Director has already been authorized to charge fees in this application to a Deposit Account.			
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-2448 . I have enclosed a duplicate copy of this sheet.			
	ciosca a daplicate	copy of this sheet.	
I am the applicant/inventor.			
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
x attorney or agent of record. Registration Numb	er. 32,181	·	
attorney or agent under 37 CFR 1.34.			
Registration number if acting under 37 CER 1.34		<u> </u>	
11 11 11 #39 4	9, N	1ay 25, 2007	
Signature		Date	
Marc S. Weiner		(703) 205-8000	
Typed or printed name	Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
Total of forms are submitted.			

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